THE IMPACT OF MATES IN CONSTRUCTION:
A MIXED-METHODS STUDY OF GAT AND CONNECTOR TRAINING
IN THE SOUTH AUSTRALIAN CONSTRUCTION INDUSTRY

Report to MATES in Construction South Australia
6 July 2017

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“...there is nothing worse than going home to an empty house...but if someone is there it’s all the more better for you to go there because you know there is someone there for you...MATES in Construction is like the person in that empty house...whenever you think it’s empty and people aren’t there, that’s where MATES are.” (Interview Participant)

EXECUTIVE SUMMARY
This report provides a summary of a research project undertaken by the University of South Australia for MATES in Construction (MIC) South Australia. The purpose of this project was to explore the impacts of MIC SA on those who had participated in General Awareness Training or Connector Training specifically. This was achieved in two phases: 1) A cross-sectional survey; 2) Semi-structured interviews.

Phase 1 of the project involved a survey of those who had participated in MIC training between June 2014 and December 2016. A total of 83 valid surveys were received. Participants reported high confidence in their ability to talk to mates (73% of participants) and family (79%) when they were personally having a tough time, and more confidence still when mates (88%) and family (87%) were experiencing a tough time. Almost 20% of participants reporting using MIC services since attending training, and 12% reported being aware of a mate doing the same. Further, approximately half (49%) of participants reported using what they learnt at MIC training to assist with a range of personal issues and/or circumstances, with the most common being to communicate with mates (36% of participants), communicate with family/loved ones (25%), and for work-related stress (31%). Fewer participants reported using the training to address drug/alcohol related issues (14%), financial pressures (10%) and suicidal thoughts (10%).

Phase 2 of the project involved follow-up, semi-structured interviews with participants who opted in after completing the survey in Phase 1. The purpose of this phase was to complement the survey by obtaining a more in-depth understanding of the experiences of those who had participated in MIC training. Ten telephone interviews were conducted and included in data analysis. Eight major themes were identified: 1) Setting the scene; 2) MIC as unique and valuable; 3) Raising awareness and building skills to respond to suicide; 4) Engaging MIC to support professional and personal needs; 5) Using MIC services and skills to support mates at work; 6) Applying MIC outside of work; 7) Factors confounding the impact of MIC; and 8) Suggestions for improvements and future needs.

Combined, the results of both phases of this project confirm that MIC SA is having a positive impact on those who undertake the training. Those who have undertaken GAT and/or Connector training report bringing MIC knowledge and skills into conscious play in both their workplace and their personal lives. Consequently, the program appears to be achieving its aims of raising awareness and building capacity for the South Australian construction industry to effectively respond to suicide.
INTRODUCTION

Suicide is a major public health concern, with suicide deaths around the global estimated to total more than 800,000 each year (WHO 2014). Over 3,000 of these deaths occur in Australia, with 75% being accounted for by males (ABS 2016). Research exploring the relationship between suicide rates and occupation highlights that those working in the construction industry are particularly vulnerable (AISRAP 2006; Heller et al. 2007; Milner 2016; Roberts, Jaremin & Lloyd 2013). Of note, a report on suicide in the Queensland construction industry found very high suicide rates among young employees (aged 15-29 years): 58.6 deaths per 100,000 population (AISRAP 2006), compared to 12.2 per 100,000 population for Australian as a whole (ABS 2016). Reasons for elevated suicide rates among this group include: working conditions and culture (e.g. long work hours, substance use, job insecurity, bullying), interpersonal relationships (e.g. relationship breakdown), and pressures from employers and home (AISRAP 2006). In addition to the personal impact that suicidal behaviour has on individuals and those around them, it also has significant financial implications. A recent report estimated the cost of suicide and suicide behaviour to be $57 million for the South Australian construction industry alone in 2012 (Doran et al. 2015).

MATES in Construction (MIC) was initiated in an effort to reduce the rates of suicide in this industry. MIC is a peer-support program designed in Australia specifically for the construction industry, and has been responsible for training over 114,000 construction workers across NSW, QLD, WA and SA in suicide prevention since 20081 (MIC 2017). MIC offers three types of training: 1) General Awareness Training (GAT), a 45 minute session introducing workers to suicide and providing practical suggestions for how to assist mates; 2) Connector Training, a four-hour session training individuals in how to keep an individual safe in a crisis, and to connect them with professional support; and 3) ASIST Training, a two-day program to essentially teach individuals to act as ‘suicide first aid’ officers on site (MIC 2017).

Evidence is growing to support the learning associated with, and acceptability of, MIC training (Banks 2013; Footprints Market Research 2012; Gullestrup et al. 2011), as well as the financial benefits it may offer (Doran et al. 2016). However, the longer-term, secondary effects have not yet been explored. Such secondary effects may include: increasing construction workers’ awareness of and sensitivity towards others who are having a ‘tough time’ at work or home; new understandings about potential risk factors for suicide (e.g. substance use, workplace bullying, or risky behaviour at work); and reducing stigma associated with help-seeking. These effects may also be seen outside of work, when engaging with family and friends. Investigating these impacts is critical for understanding the longer-term outcomes and secondary benefits of MIC SA training, as well as whether the program is meeting its objectives, and to gain a more complete picture of how this approach contributes to suicide prevention. The current project set out to understand these effects, particularly among those who had completed GAT or Connector training in South Australia.

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1 This includes 10,294 people trained in GAT, 594 in Connector, and 143 in ASIST in South Australia.
RESEARCH METHODOLOGY

This project employed a mixed-methods approach and was conducted in two phases: 1) A cross-sectional survey, and 2) Semi-structured interviews.

ETHICS APPROVAL

The project received ethics approval from the University of South Australia Human Research Ethics Committee. Participants were provided with an Information Sheet for each stage of the research project (see Appendix B) and were required to provide informed consent either electronically or in hard copy for Phase One (depending on their preference for completing the survey), and verbally for Phase Two (at the start of each audio-recorded interview).

PARTICIPANT RECRUITMENT AND ELIGIBILITY

Participants were eligible for this study if they were adults (i.e. >18 years) and had undertaken GAT or Connector training since June 2014. This date was chosen in consultation with MIC SA CEO Michelle Caston, as the purpose of the project was to seek the experiences of those who had participated in the training recently (i.e. approximately in the last two years at the time of commencing data collection). Further, the decision to focus on those who had participated in GAT or Connector training was directed by MIC SA, given that the organisation has less visibility of the impact of their program on these individuals, compared to those who have completed ASIST and who are in more regular contact with MIC.

Participant recruitment for Phase 1 followed a rigorous and lengthy process between September and December 2016. With the assistance of MIC, the following recruitment methods were employed:

1) A series of three invitation emails from the national MIC office to those on the MIC SA mailing list who had undertaken GAT or Connector training since June 20143;
2) A post on the MIC SA Facebook page;
3) A post on the national MIC website;
4) Posters displayed at approximately 20 metropolitan Adelaide construction sites (delivered by MIC SA field officers; see Appendix C);
5) Hard copy surveys and return boxes at the metropolitan Adelaide sites of four major construction organisations (distributed and collected by MIC SA field officers).

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2 For an overview of the project timeline and key activities, see Appendix A
3 Response data from the email invitations were as follows:
   - Email 1 (19/09/16) was sent to 3445 email addresses: 65 bounced back, 2661 were not opened, 769 unique opens (survey link clicked 72 times);
   - Email 2 (28/09/16) was sent to 3151 email addresses: 81 bounced back, 2449 were not opened, 621 unique opens (survey link clicked 41 times)
   - Email 3 (05/12/16) was sent to 3383 email addresses: 79 bounced back, 2566 were not opened, 738 unique opens (survey link clicked 37 times)
PROCEDURE, OUTCOME MEASURES AND DATA ANALYSIS

Phase One: Cross-sectional survey

All participants completed a brief (10 minute) survey, either electronically or in hard copy, depending on their preference. Due to the absence of outcome measures relevant to this population, and the specific interests of MIC SA in commissioning this research, the survey was purpose-designed for this study in consultation with Michelle Caston, and took into consideration previous research undertaken for MIC (Banks 2013; Footprints Market Research 2012; Gullestrup et al. 2011).

Significant focus was placed on ensuring that the survey and associated documents (i.e. information sheet, consent form, and poster) were written in language suitable for the target audience. Further, the survey was intended to be brief, to reduce participant burden and encourage participation, particularly in light of the often busy work environments. The survey was pilot tested for clarity by MIC SA staff prior to distribution.

The survey was divided into four sections:

1. **Confidence since undertaking MIC SA training** – comprised of four rating scale items related to confidence in talking to mates and family (5 point rating-scale, from ‘extremely confident’ to ‘not at all confident’).
2. **Use of MIC SA services and skills** – comprised of nine items (yes/no response) assessing use of MIC services and skills in various life domains, both at work and at home, and to assist with specific issues commonly experienced by people working in the construction industry, particularly: financial pressures, relationship stressors, suicidal thoughts, and drug/alcohol use. Participants who reported using MIC SA services or skills in any of these domains were asked to describe this further via open-ended questions;
3. **Demographic details** – gender, age, current work description (i.e. occupation/trade), years of experience in the industry, postcode (as a measure of socio-economic status), prior experiences with suicide, and which MIC SA training participants had attended (i.e. GAT or Connector);
4. **Interview interest** – participants were asked to express their interest in participating in Phase Two of the research (telephone interviews), and to provide contact details.

For a full copy of the survey, see Appendix D.

All rating scale, dichotomous (yes/no), and demographic survey items were analysed descriptively, using percentages and frequencies to describe trends in the data (conducted in Microsoft Excel 2010). Due to the relatively low response rate to open-ended responses, these have not been categorised in to key themes; instead, they have been summarised, with sample verbatim quotes provided where available.
Phase Two: Semi-structured interviews

Participants who expressed an interest in Phase Two of the research were contacted by the lead researcher (MF) by phone and/or email approximately two months after the survey closed, and were invited to participate in a telephone interview. All potential participants were contacted a maximum of three times. If there was no response after the third attempt, the participant was removed from this phase of the research. Further, in a number of instances, interviews needed to be rescheduled (sometimes multiple times) due to participant unavailability.

Telephone interviews were chosen as more appropriate than in-person interviews, to allow for flexibility of interview times (e.g. evenings). The interviews followed a semi-structured format, and were conducted by one researcher (MF). Broad questions were used to guide the interviews and were decided in collaboration between the research team and Michelle Caston (for a sample interview schedule, see Appendix E).

All interviews were audio-recorded. Further, hard-copy notes were taken by the researcher during the interviews, along with reflective notes at the end of each interview, to allow for interpretation of the audio-recorded data. The audio-recordings were then transcribed prior to data analysis.

To preserve participant confidentiality, no participant names were used during the audio-recording of the interviews. Further, all names of people, places, companies and/or sites were removed from the transcribed interview data prior to data analysis.

Interview transcripts were analysed thematically according to Braun and Clarke’s (2006) six-stage procedure:

1) data familiarisation (repeated re-reading of the transcribed data, and taking notes);
2) generating initial codes (coding specific features of the data, and collating data related to each code);
3) collating codes into themes (combining multiple codes to form possible themes);
4) reviewing themes (checking whether codes match themes, and whether these themes cover the full data set);
5) defining and naming themes (further refining themes, and using definitions and names to describe each theme); and
6) producing the report (selection of relevant participant quotes and extracts to support themes, and interpretation of themes).

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4 An external transcriber was engaged to undertake this work.
RESEARCH FINDINGS – PHASE ONE: SURVEY

RESEARCH PARTICIPANTS
A total of 118 participants began the survey (88 online and 30 hardcopy). Of these, 17 were incomplete (i.e. did not complete further than the first question), and 18 were ineligible as participants stated that they had completed ASIST training. This resulted in 83 valid surveys for inclusion in this report.

The majority (57%) of survey participants indicated that they had completed GAT only as their highest level of MIC training, with 23% reporting that they had completed Connector. The remaining 20% did not record which training they had undertaken, however it is believed that they completed GAT\(^5\) and have therefore been included in the results of this report.

As outlined in Table 1, participants were primarily male (83%), with a mean age of 43 years (range = 19 – 66 years). Just over half of participants identified themselves as working in ‘grassroots’ roles – tradespersons (31%), labourers (12%), apprentices (5%) and unspecified construction (6%). The remainder identified as more senior roles, such as supervisors/managers (27%), safety officers/representatives (10%), union delegates (2%) and administrators (1%). Participants reported having an average of 19 years’ experience in the industry (range = 1 month – 42 years). Over half (60%) of participants had some prior experience with suicide, including one or more of the following: the death of a mate (33%), attempt of a mate (25%), death of a family member (18%), attempt of a family member (20%), and/or own suicide attempt (3%).

\(^5\) These surveys were completed in hard copy and were distributed at sites where potential participants had only received GAT training (based on information provided by Michelle Caston).
TABLE 1. DEMOGRAPHIC DETAILS OF PARTICIPANTS WHO COMPLETED THE SURVEY (n = 79)\(^6\)

<table>
<thead>
<tr>
<th>CHARACTERISTICS</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest level of MIC training</td>
<td></td>
</tr>
<tr>
<td>GAT</td>
<td>47 (57%)</td>
</tr>
<tr>
<td>Connector</td>
<td>19 (23%)</td>
</tr>
<tr>
<td>Not recorded</td>
<td>17 (20%)</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Male, n(%)</td>
<td>69 (83%)</td>
</tr>
<tr>
<td>Female, n(%)</td>
<td>10 (12%)</td>
</tr>
<tr>
<td>Age, m(sd)</td>
<td>43yrs (13yrs)</td>
</tr>
<tr>
<td>Current work description</td>
<td></td>
</tr>
<tr>
<td>Apprentice</td>
<td>4 (5%)</td>
</tr>
<tr>
<td>Tradesperson</td>
<td>26 (31%)</td>
</tr>
<tr>
<td>Labourer</td>
<td>10 (12%)</td>
</tr>
<tr>
<td>Union delegate</td>
<td>2 (2%)</td>
</tr>
<tr>
<td>Supervisor/manager</td>
<td>22 (27%)</td>
</tr>
<tr>
<td>Safety officer/representative</td>
<td>8 (10%)</td>
</tr>
<tr>
<td>Administrator</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>Construction (role not specified)</td>
<td>5 (6%)</td>
</tr>
<tr>
<td>Other</td>
<td>2 (2%)</td>
</tr>
<tr>
<td>Years in industry, m(sd)</td>
<td>19yrs (14yrs)</td>
</tr>
<tr>
<td>Previous experience with suicide^</td>
<td></td>
</tr>
<tr>
<td>Had a family member suicide</td>
<td>15 (18%)</td>
</tr>
<tr>
<td>Had a family member attempt suicide</td>
<td>17 (20%)</td>
</tr>
<tr>
<td>Had a mate suicide</td>
<td>27 (33%)</td>
</tr>
<tr>
<td>Had a mate attempt suicide</td>
<td>21 (25%)</td>
</tr>
<tr>
<td>Personally attempted suicide</td>
<td>3 (4%)</td>
</tr>
<tr>
<td>No previous experience with suicide</td>
<td>25 (40%)</td>
</tr>
</tbody>
</table>

Note: ^participants could select more than one option; n = number of participants; m = mean; sd = standard deviation

\(^6\) Demographic data are based on results from 79 participants, as four did not complete this section of the survey. Further, some participants did not complete all demographic questions, and therefore results may not total 100% in some places (e.g. gender and occupation).
RESULTS
The results described in this section are based on 83 valid surveys.

Confidence since undertaking MIC training
Participants were asked to rate their confidence since undertaking MIC training with regards to talking to mates and family (5 point rating-scale, from ‘extremely confident’ to ‘not at all confident’). As outlined in Figure 1, the majority of participants reported feeling confident to talk to mates when they are having a tough time personally themselves (73% extremely confident and confident combined), or when mates are having a tough time (88%). Similarly, the majority reported feeling confident to talk to family when they are having a tough time themselves (79%), or when family are having a tough time (87%). Of note, participants reported more confidence when talking to either mates or family who were having a tough time, rather than when they are having a tough time themselves.

FIGURE 1. CONFIDENCE OF PARTICIPANTS SINCE UNDERTAKING MIC TRAINING (N = 83)
Use of MIC services and skills
Participants were asked a series of yes/no questions regarding their and others’ use of MIC SA services since undertaking training, and were asked to provide details of services that had been used. When asked if they had personally used MIC services since undertaking the training, 19% (n=16) of participants stated that they had done so, with 15 participants specifying what they used it for. Responses included:

- seeking support for family-related issues (n = 2)
- seeking support for work-related issues (n = 4)
- gaining advice (non-specific; n = 1)
- supporting others at work (non-specific; n = 6)
- other (n = 2)

Further, 12% (n = 10) of participants said that they were aware of a mate using MIC SA services, with nine giving an explanation. However, in most cases, the descriptions participants provided were unclear (e.g. a few words), making it difficult to determine meaning.

Participants were subsequently asked to report whether they had used what they learnt during MIC SA training to assist with a range of personal issues/circumstances. Almost half (49%, n=41) of participants reported using MIC training to address at least one of these personal issues/circumstances. Of those who reported using MIC training, participants reported using it in an average of 3 areas of life (SD = 2, range = 1-7 areas). These responses are outlined in Figure 2.

![FIGURE 2. USE OF MIC SA TRAINING IN VARIOUS ASPECTS OF LIFE (N = 83)](image-url)
Communicating with others
Perhaps not surprisingly, the most common area of life in which participants reported using MIC training was when communicating with mates (36%, or n=30), with participants providing general examples of being supportive, non-judgemental and listening, as well as specific examples of where they have supported others:

- “Everyone has a story. Don’t judge.”
- “I’m always asking how guys are around me and interested in actually listening to the answer.”
- “As a group we have discussed openly the pressures at work and have agreed to keep an eye out for each other.”
- “Spoke to a friend after the death of one of his close friend to ensure he was OK and encouraged him to look after himself, not just those around them. Followed it up with a phone call a few weeks later.”
- “...I continually discuss all types of problems with the workforce, and my phone is never turned off.”
- “The importance of listening and the power of simple observation.”

Further, approximately 25% (n=21) of participants indicated that they have used MIC training to communicate with family/loved ones. Examples highlight the importance of communicating more openly:

- “Personal issues dealing with family and friends making them understand it is ok to share.”
- “Discuss issues more freely.”
- “All the time I talk about issues that affect us. And let them know that it is ok to discuss all issues that are bothering them.”
- “Take the time out everyday to talk to the family in three ways, whilst occupied/distracted, whilst eating together, prior to going to bed.”

Financial pressures
10% of participants indicated that they have used MIC SA training to assist with financial pressures. Descriptions of how this was used were unclear in most instances, however some participants described the importance of seeking support early and supporting mates who are experiencing this:

- “Seek help don’t take it on by yourself, talk to someone as soon as possible.”
- “Just [be] a friend and list (sic) to his issues and help steer him in the right direction.”
Work-related stress
Over 30% of participants reported using MIC SA services for work-related stress, including supporting others and talking more openly about work-related issues, both at work and at home:

- “I deal with this issue more than any other issue at work with the construction industry, a lot of lads seem to think there is no way out of it, but once they find someone to talk to about it they can move forward.”
- “I can talk about it now.”
- “Talk it out with my family.”
- “Giving advice to a close relative about their work issues. Reminding them that there are more important things to life other than work.”

Drug/alcohol issues
Close to 15% of participants reported using MIC SA training to assist with drug/alcohol use. Descriptions of how this was used were not clear in most cases, however some participants gave clear examples of supporting others experiencing drug/alcohol use:

- “Talk about the problem that they feel has brought them to this stage in their life, and why do they think the drugs or alcohol is being used, and talk about seeking assistance for the problems.”

Family/relationships
Over 20% of participants reported using MIC SA training to assist with family or relationship issues. Responses were varied, including enquiring about suicidal thoughts, and more effective communication. Examples include:

- “Have asked my niece if she was contemplating taking her life.”
- “Sit down and listen to their problems and work out [an] avenue to move forward in a positive way.”
- “We communicate better now.”
- “The importance of listening.”

Suicidal thoughts
10% of participants reported using MIC SA training to assist with their own or others’ suicidal thoughts. Examples include:

- “I have lost 2 children which has been devastating to myself and my family. I had thought about suicide but after sitting through a [MIC] session I took what they said on board and started talking about my situation with my co-workers and my family.”
- “Had 6 different workers not coping all had help all returned to work.”
RESEARCH FINDINGS – PHASE TWO: INTERVIEWS

RESEARCH PARTICIPANTS

Of the 83 valid Phase One survey participants, 22 (27%) recorded that they would be interested in participating in the Phase Two follow-up interviews, and 19 (23%) provided contact details. Of the 19 participants, one was a wrong phone number (with no email address provided), three declined to participate, and two did not respond to multiple contact attempts. Further, two participants agreed to participate when first contacted, but could not be reached at the scheduled interview times and did not respond to multiple attempts to reschedule. As a result, a total of 11 people agreed to and participated in an interview. One of these was subsequently excluded, as upon starting the interview the participant did not recall undertaking MIC SA training. This resulted in 10 interviews included (12% of the original survey sample). Figure 3 illustrates the recruitment process.

![Flowchart showing the recruitment process from Phase One survey participants to interviews included in results.]

**FIGURE 3. FLOW OF PARTICIPANTS INCLUDED AND EXCLUDED FROM PHASE TWO OF THE RESEARCH**
The 10 included interview participants were all males, with a mean age of 49 years (range = 46 – 58 years). They were working in either safety (n = 5) or supervisor/management positions (n = 4); one participant was not currently working. Participants had an average of 25 years of experience in the industry (range = 4 – 42 years). The majority (n = 7) had participated in GAT only, while the remaining (n = 3) had also undertaken Connector training.

RESULTS
Eight major themes were identified from the interview data:

1. Setting the scene;
2. MIC as unique and valuable;
3. Raising awareness and building skills to respond to suicide;
4. Engaging MIC to support professional and personal needs;
5. Using MIC services and skills to support mates at work;
6. Applying MIC outside of work;
7. Factors confounding the impact of MIC; and
8. Suggestions for improvements and future needs.

Although the intended focus of the interviews was to gain an understanding of the flow-on impacts of MIC SA, the majority of participants devoted time to discussing some background factors first, as outlined in Themes 1 and 2, with the remaining themes relating more directly to the impact of MIC training and use of MIC skills both at work and in participants’ personal lives. Quotes are provided to illustrate each theme.

Theme 1: Setting the scene
Participants spent considerable time discussing current issues in the construction industry (Table 2). This was seen as integral to setting the scene for the conversations to follow, and for reinforcing the need for MIC SA. In particular, participants discussed a range of issues experienced by construction workers. These included the prominence of substance use, uncertainty in the workforce, and extensive work hours. Despite these challenges, some participants also reflected on the positive aspects of the industry, including the varied work environment. Some participants also discussed a stoic culture in the industry, and for males in society in general. Others pointed out that this culture is slowly changing, with more awareness regarding the importance of talking about issues.
TABLE 2. SAMPLE QUOTES FROM THEME 1: SETTING THE SCENE

<table>
<thead>
<tr>
<th>THEME DESCRIPTIONS</th>
<th>PARTICIPANT QUOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Issues in the industry</td>
<td>“...there’s three things I would have to say...one, it’s nomadic, so your job security is not very good; number two is the high risk, very, very high risk work, and number three, it’s hard work.” (Participant 5)</td>
</tr>
<tr>
<td></td>
<td>“For the young guys coming through to not have any form of job security, they’ve got young families, they are trying to save for mortgages, bank don’t want to know about casual” (Participant 3)</td>
</tr>
<tr>
<td></td>
<td>“And partying hard until 3-4 in the morning and coming to work, especially Thursday, Friday, Saturdays, they’re probably the worst days...No, even Mondays, I suppose Wednesdays...Tuesday and Wednesday are the only good days” (Participant 8)</td>
</tr>
<tr>
<td>Positive aspects of the industry</td>
<td>“...it’s quite engaging, you meet different people every day. It’s a lot easier than going into an office environment and seeing the same mundane people and looking at the same mundane computer.” (Participant 9)</td>
</tr>
<tr>
<td>Changing culture</td>
<td>“…the industry itself many years ago was more or less, you know, ‘pull your head out of your arse and get on with it’, you know, ‘what are you sooking about?’, whereas nowadays, it’s a more approach of trying to understand it and some people deal with situations differently, where years ago I suppose that’s where the stigma came in…” (Participant 1)</td>
</tr>
<tr>
<td></td>
<td>“I had some staff breakdown in from of me the other day, he and his wife were having a bit of a hard time and, you know, it’s interesting, he’s never cried in front of his wife but he cried twice in front of me...I mean, ten years ago guys didn’t cry in front of guys, that was just, you know, you’d be off the site for that, so yeah, but I think the world is changing.” (Participant 7)</td>
</tr>
</tbody>
</table>

Theme 2: MIC as unique and valuable
Participants readily offered positive feedback regarding MIC as an organisation and the important gap that it fills in the construction industry (Table 3). Participants stressed that MIC is a ‘good fit’ for the construction industry. They also stressed the value of the way that MIC training is delivered, by people who are recognised as being part of the industry and who can connect with their audience. Participants also commented on the style of delivery as being valuable and engaging.
### TABLE 3. SAMPLE QUOTES FROM THEME 2: MIC AS UNIQUE AND VALUABLE

<table>
<thead>
<tr>
<th>THEME DESCRIPTION</th>
<th>PARTICIPANT QUOTES</th>
</tr>
</thead>
</table>
| MIC as a ‘good fit’ | “[MIC is] a better model to run that the Mental Health First Aid because that’s the sort of thing that we are seeing on site.” (Participant 2)  
“…I think MATES is a good fit with what the management of construction really want people to do, like, I think they know it’s not going to be an overnight, yeah everyone’s talking about their emotions, but it does help to be told that it’s ok and have some examples and makes people think.” (Participant 6) |
| MIC as able to connect with industry | “I think it’s the way [MIC] can connect, they are very, I don’t know what’s the word, it’s very connected to the audience they’re presenting to…You know, it’s a difficult subject matter and they give it the respect it deserves without tip-toeing at it at times…” (Participant 7)  
“People that give the talk, talk like they’re people in the industry, they talk like people here talk to me every day, they don’t talk like someone coming, you know, from a government department trying to get suicide rates down by giving stats and giving it in a clinical way, it’s a very friendly, accessible chat.” (Participant 6)  
“…their approach is fantastic, like, at first I thought ‘oh who are these peanuts?’, you know, but then about five minutes in I thought…’Wow! This is held together pretty good, this course’…” (Participant 8) |
| Engaging delivery style | “the way they give information, it does sink in, it does work and they, yeah, like I said it wasn’t like a lecture, it was more like a friendly chat with some scary stats and then it was, like, ‘hands up if you know someone who has [died by suicide]’, three quarters of the room had, and then it was like, ‘Wow!’...it was fun, friendly, accessible, but then it had this real moment where it reinforced the point of people’s experience…” (Participant 6)  
“People need that though, they defuse the situation with a bit of a laugh about something, which I think gives them, you know, one, they can talk to their audience, and two, it’s not a lecture, it’s not, you know, walking out feeling depressed about that…it’s just the right balance of, you know, it’s very important issues and you’ve got to help your mates out, and also enough sort of lightness in it to make it bearable to digest.” (Participant 7)  
“…you can tell they are sincere and they do it from the heart, it’s not just a job they want to do, which is great.” (Participant 8) |
Theme 3: Raising awareness and building skills to respond to suicide

Although perhaps not surprising, given the aims of MIC, participants described the value of the training for raising their awareness of suicide (Table 4). This included awareness of suicide statistics and gaining insight into the potential reasons for suicidal behaviour. It also involved learning to recognise or be alert to suicide triggers and warning signs, being more aware of others’ behaviour and what it might imply. Further, participants reported gaining confidence to talk about their own issues, as well as to talk to each other. The latter included developing skills around the language to use when talking about suicide, and the confidence to talk.

**TABLE 4. SAMPLE QUOTES FROM THEME 3: RAISING AWARENESS AND BUILDING SKILLS TO RESPOND TO SUICIDE**

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<thead>
<tr>
<th>THEME DESCRIPTIONS</th>
<th>PARTICIPANT QUOTES</th>
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<tbody>
<tr>
<td>Suicide statistics</td>
<td>“...the statistics are mind-blowing” (Participant 7)</td>
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<tr>
<td>Awareness of others’ behaviour</td>
<td>“so just to be aware to look at people every day and see how they react and things like that, you know, and if someone is a little bit quiet and subdued you might just take a little bit of time out to go have a chat with them and see how they are going, not generally about work, but just about life in general.” (Participant 1)</td>
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<td>Confidence and skills to talk</td>
<td>“If you do suspect it [suicide], you’ve got to ask just some sort of leading question because you don’t want the answer to be a one-word answer, you want to bring them out and start them talking and then maybe you can lead to other things where you think the problem may lie” (Participant 1)</td>
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<td></td>
<td>“I suppose just being the first one [GAT] but it’s just sort of identifying that you know you can make a difference to people just by asking simple questions” (Participant 4)</td>
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<td></td>
<td>“…you can’t skirt around the issue sort of thing, so, you actually, you know, if somebody’s suicidal you can’t say ‘are you feeling ok?’; you actually have to say ‘are you thinking of killing yourself? Do you have a plan?’ Because if they, you know, are long past not feeling ok, and you have to really seize the moment I guess because otherwise it’s gone.” (Participant 7)</td>
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</table>

Theme 4: Engaging MIC to support professional and personal needs

Participants spoke of the direct benefits MIC has had on them, both professionally and personally (Table 5). Given the senior roles that many participants were employed in, a number of comments were made regarding the important role that MIC has played in relieving some of the pressure that they feel to provide support to others at times of crisis. MIC provides an additional, and often times missing, avenue of support. In addition to their professional needs, a number of participants spoke of accessing MIC
services in their own times of need, as well as giving specific examples of reaching out to Connectors to address their personal needs, such as stress and family issues.

TABLE 5. SAMPLE QUOTES FROM THEME 4: ENGAGING MIC TO SUPPORT PROFESSIONAL AND PERSONAL NEEDS

<table>
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<th>THEME DESCRIPTIONS</th>
<th>PARTICIPANT QUOTES</th>
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| MIC relieves pressures | “...years ago we used to deal with all of that and we never had any training in this so we were just sort of shooting from the hips...to have the arm of MATES in Construction, it just relieves that bit of pressure where, you know, if someone has got an issue you can give them to MATES in Construction and you know these people know how to deal with construction workers.” (Participant 1)  
...it's having that service that you can use, you know, they are supporting me to do my job...they definitely trained me as well because, they are there to remind me and to keep me aware...” (Participant 5)  
“So rather than me getting so fricken involved and coming up with all the solutions, I am providing them that direct link [to MIC]...And it also sort of saves me, saves more of me for me...So that when I've got s**t going on, I don’t need to access the service” (Participant 4) |
| Accessing MIC in times of need | “MATES in Construction were there for me right from the beginning way back you know in the early days [when dealing with a personal issue?]” (Participant 2) |
| Reaching out to Connectors | “...it was through a Connector...who was also my direct line manager, I sort of shut the door and said, ‘Hey, I’m not coping’, you know, my stress has built up...and just by him saying [MIC’s] available and I rang up and yeah, it was a great hour actually” (Participant 4)  
“...when we had the MATES chat, they said if anyone wants to stay behind and have a chat with a Connector, stay behind...[The Connector] goes ‘Is there anything else happening?’ And then we talked about, you know, having fights at home because the hours are long, and he said ‘Well, how do you deal with that?’ and I said ‘Well, I don’t know, we just have a few arguments and go to bed and hope it goes away’, and he goes ‘Do you think that’s a really good way of dealing with it?’ and I said ‘Well, probably not’, but to that point I hadn’t actually stopped and thought about how am I going to deal with this, because I was always thinking there’s no way I can change this...So, he said “basically, you need to understand the other needs to feel like they’re part of the team as well...” (Participant 6) |

7 Details excluded to preserve participant anonymity
Theme 5: Using MIC services and skills to support mates at work

Participants offered a number of examples regarding how they have used MIC training to support mates at work (Table 6). This included practical support, such as helping others to access support services in times of need, giving staff time off to address their health (either physical or mental), and following-up to see how the person is getting on. Other participants shared examples of how they understand and respond to the needs of others, by ensuring social connectedness, showing care, and having conversations. Some participants also recognised the importance of recovery and aftercare, both for the individual and their family.

**TABLE 6. SAMPLE QUOTES FROM THEME 5: USING MIC SERVICES AND SKILLS TO SUPPORT MATES AT WORK**

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<th>THEME DESCRIPTIONS</th>
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<tr>
<td>Practical support for others</td>
<td>“I think it sort of makes them feel, you know, sort of more valued, even if it’s indirectly said. The fact that somebody gave enough of a s**t to go ‘hey, to me you are appearing tired or whatever, what about you have a weekend off mate and do something for yourself, chillax or spend some time with your kids, or whatever’...without fear of reprisal” (Participant 3)</td>
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<td>Social connectedness could add some more quotes here</td>
<td>“By the way we talk and by the way we get people talking is by, you know, by having those conversations, having those hard conversations with people, showing people that there is help available.” (Participant 2)</td>
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<td>Recovery and aftercare</td>
<td>“…there is nothing worse than going home to an empty house...you know, but if someone is there it’s all the more better for you to go there because you know there is someone there for you...MATES in Construction is like the person in that empty house...whenever you think it’s empty and people aren’t there, that’s where MATES are” (Participant 1)</td>
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<td>“It’s not just about getting them back on the job, you know, that’s one of the issues, but the issue is to get them back into living their life so they are ok to function...and support themselves and their families...because when someone takes their life it affects everybody...” (Participant 1)</td>
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<td></td>
<td>“…you can give them a call and just see how they are going...’ok, let me know when you are ready for back to work, give us a call and I will see what I can do about getting you a job’” (Participant 1)</td>
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Theme 6: Applying MIC outside of work

Although based in the workplace, the skills and knowledge obtained through MIC training are transferable to other areas of life (Table 7). Consequently, a number of participants described their use of MIC learning to support others outside of work, such as friends and family. Further, one participant spoke of his ability to ask a mate more directly about suicide since doing MIC training.

**TABLE 7. SAMPLE QUOTES FROM THEME 6: APPLYING MIC OUTSIDE OF WORK**

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<th>THEME DESCRIPTIONS</th>
<th>PARTICIPANT QUOTES</th>
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<tr>
<td>Supporting friends/family</td>
<td>“I think it’s a great thing and this is one of the most important things about it, you don’t just use it for this work, this is a life experience that you learn and you can talk to other people whether it may be in the hotel, your family...don’t restrict yourself to think that MATES in Construction is just about MATES in Construction, it’s about everybody in society...” (Participant 1)</td>
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<td>“Probably just a little bit more open to reading people and probably just listening a bit more...it’s just helped me maybe before I engage into situations, just look, observe what is happening, body language, the like, so I guess it’s helped me to do that a little bit more about those listening skills and also just observing, just watching people’s mannerisms.” (Participant 9)</td>
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<td>“my son-in-law, he wasn’t coping, he was on the phone and...he was spinning out and talking irrationally and I said ‘I’m here, I’m here, I love you, we’re here, we’re your family’. I think you’ve got to bring love into it, that people do love them.” (Participant 8)</td>
</tr>
<tr>
<td>Talking directly about suicide to a mate outside of work</td>
<td>“[Prior to the training] I would never have pushed that hard, I would have said ‘Alright mate, take care of yourself’...I would never have directly asked him [if he was going to try to hurt himself]” (Participant 7)</td>
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</table>

Theme 7: Factors confounding the impact of MIC

Despite the various examples of the benefits of MIC previously described, a number of participants explained that it is difficult to determine specifically the impact that MIC has had on them (Table 8). This is attributed to a number of factors, including: many participants having worked in the industry for a number of years, and undertaken various training and professional development opportunities to raise their conscious awareness of the issue of suicide and how to respond; a number of participants were employed in health and safety roles and described themselves as already being passionate about supporting others, and familiar with seeking support as needed. Regardless, participants discussed the importance of MIC training for reinforcing what they are already doing. Others explained that it was difficult to determine the impact of MIC across the industry because this varies from site-to-site. Finally, some participants could not comment on the impact MIC is having on other workers, as the nature of their work (e.g. office-based) means they are often removed from the day-to-day happenings on site.
TABLE 8. SAMPLE QUOTES FROM THEME 7: FACTORS CONFOUNDING THE IMPACT OF MIC

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<th>THEME DESCRIPTIONS</th>
<th>PARTICIPANT QUOTES</th>
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<tr>
<td>Already working in this way</td>
<td>“I mean, I’ve always, always talked to my family anyway and mates, so yeah, it hasn’t really changed anything for me” (Participant 10)</td>
</tr>
<tr>
<td>MIC reinforces what participants already do</td>
<td>“I guess it just reaffirmed and probably supported some of the processes I was already doing, so yeah it was, you know, it’s just, it’s probably just a good refresher” (Participant 9)</td>
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Theme 8: Suggestions for improvements and future needs

Participants offered suggestions for how MIC might be improved, or future directions that the program might take (Table 9). In particular, a number of participants stressed the desire to undertake further training themselves, but explained that certain factors – such as time, finances, or competing job demands – were preventing this.

While some participants believed there to be wide-spread awareness of MIC, others stressed that more could be done to improve this, both on- and off-site. Suggestions for doing so include making it common practice to mention MIC during inductions and ‘toolbox’ talks, and reminding people of MIC services. One participant also suggested the need to address cultural considerations (e.g. training in different languages). Others stressed the need for outside awareness of MIC, particularly for securing additional funding to ensure its longevity.

The need for follow-up was also discussed, both in the context of following-up on specific sites and workers to ensure that all people on-site have received the training, as well as follow-up and support for those who are more involved with MIC (e.g. Connectors). One participant’s suggestion was to hold an informal trainee forum, as a medium to provide ongoing support.
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<th>THEME DESCRIPTIONS</th>
<th>PARTICIPANT QUOTES</th>
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<tr>
<td>Barriers to further training</td>
<td>“…so that sort of GAT training obviously, I want to go on and do more, it’s just taking the role I have here, mate, I’ve got about five or six hats on.” (Participant 1)</td>
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<td>“I was quite open to that first session [GAT]. It was probably something I was keen to go to the next session [Connector] and delve a little bit deeper into but obviously my company wouldn’t really support the financial for me to do the course…it’s something that I would have to consider doing off my own back, at my own costs.” (Participant 9)</td>
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<td>“…that’s the only thing that would hold me back [from being a Connector] is I am not able to at the drop of a hat, go to someone…I cannot leave my role because if I leave my role it’s a complicated procedure to leave…” (Participant 6)</td>
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<tr>
<td>Improving internal awareness of MIC</td>
<td>“…the guys need to be made aware that, ‘Hey, look, you know [name], he’s a Connector, he’s a really approachable bloke if you want to go and have a chat to him at any time, he’s always there for a bit of a chinwag if you want.” (Participant 3)</td>
</tr>
<tr>
<td>Improving external awareness of MIC</td>
<td>“...it doesn’t seem to be taken that important by certain people within the government, which is a hard thing but the unions will continue to push for it...we really need to make everyone aware that how important this is for the construction industry…” (Participant 1)</td>
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<tr>
<td>Need for follow-up from MIC</td>
<td>“I’d like to see more of just the General Awareness courses…I’m on a really big project at the moment and the turnover is high, all those guys that did the course three months ago, they could be gone...But now there is a whole new group of people coming through that haven’t done the course.” (Participant 3)</td>
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<td>“…just 15 minutes saying, ‘Hey, guys, in this past three months have you learnt anything from your training, have you used anything...’” (Participant 9)</td>
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<td>Informal trainee forum</td>
<td>“…maybe once a quarter there’s a forum where all the Connectors could meet up just to have a chinwag about what their thoughts were, what they came across, what they didn’t come across, what they thought some of the areas for improvement could be…” (Participant 9).</td>
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RESEARCH CONCLUSIONS

This is the first, mixed-methods study into the experiences of South Australia construction workers who have undertaken GAT or Connector training through MIC. Results from this cross-sectional survey (n = 83) indicate that the program has a positive impact on participants self-reported confidence in their ability to talk to others, both at work and in their personal lives. Findings reveal that approximately 20% of participants had used MIC services, and close to 50% reported using what they learnt during the program to assist with a range of circumstances, with the most common being to communicate with mates (36% of participants), communicate with family/loved ones (25%), and for work-related stress (31%). Fewer participants reported using the training to address drug/alcohol related issues (14%), financial pressures (10%) and suicidal thoughts (10%). Complementing this, the telephone interviews (n = 10) provided an opportunity for a more in-depth exploration into the experiences of survey participants, providing specific examples of how MIC SA has been of benefit to participants both professionally and personally, as well as for themselves directly and when supporting others. Findings support that MIC is having its desired impact in its ability to raise awareness about suicide and issues in the construction industry, and is meeting its aim of boosting construction workers’ skills regarding supporting others, both at and outside of work.

PRACTICAL IMPLICATIONS AND FUTURE DIRECTIONS

These findings mirror the growing body of national evidence (Banks 2013; Footprints Market Research 2012; Gullestrup et al. 2011) and indicate that MIC SA is having the desired impact on those in the construction industry who engage with their program. Further, the flow-on impacts are clear from this study, with construction workers using the skills they have learnt to support others, both on- and off-site. This suggests that MIC SA is providing a critical and highly acceptable service to the industry and that this can improve lives.

In addition to suggesting that MIC SA continue to provide their existing service, some suggestions from participants in Phase 2 of this research could be considered. These include the role that MIC might play in supporting workers to undertake further training (although it is recognised that many of the barriers participants mentioned relate to the workplace, rather than MIC SA), raising awareness of MIC both internally and externally to sites, diversifying content to improve relevance for various cultures, and strategies for ongoing support for those who have undertaken the training (particularly Connector).

LIMITATIONS

Limitations of this research should be acknowledged. Specifically, despite multiple recruitment strategies, including the option to complete the survey in either hard copy or electronic format, and invitations to participate coming from within MIC who have existing relationships with the industry, the survey sample size is smaller than we had anticipated. We attribute this to time pressures in the workplace, despite the brevity of the survey itself. Regardless, the survey sample appears representative demographically of the current construction industry.
Similarly, although 19 participants provided contact details for the interview phase, only 10 were included. Feedback from those who responded but declined, or who required interview times to be rescheduled, was that time was a barrier to participating. While the interviews provided an opportunity to gain in-depth insights into the impact of MIC, generalisability of this data is limited in that all participants were from management or health and safety backgrounds (similar to Banks’ (2013) survey of ASIST workers), and therefore the results may differ for those working ‘on the tools’. While participants were able to provide opinions based on their experiences of what they see on the ground, interviews with construction workers at ‘grass-roots’ levels might reveal different findings.

Finally, while a cross-sectional design was determined most appropriate for meeting the project aims requested by MIC SA (that is, to understand the impact MIC is having on those who have previously undertaken training), the absence of a pre-/post-test design, or control group comparison, means causation cannot be implied. Future research should consider a more experimental design in order to fully understand the impact of MIC.

**CONCLUSION**

Through a two-phase investigation, this research has revealed that MIC is having its desired impact on workers in the construction industry in South Australia, and appears to be achieving its aims of raising awareness and building capacity for the South Australian construction industry to effectively respond to suicide. Those who have undertaken GAT and/or Connector training report bringing MIC knowledge and skills into conscious play in both their workplace and their personal lives. Mental distress, suicidal states and other concerns related to mental health and wellbeing have inherent characteristics unique to the individuals concerned. It is important to narrow as far as possible the amount of social distance between a person in mental distress and another willing to help. Such distance can be narrowed by knowing how to begin a conversation about personal troubles and what to say next. The present research provides evidence that such distance has been narrowed in the working and personal lives of construction workers through GAT and/or Connector training. These findings support the value of the work that MIC SA has been undertaking and suggest that the program should continue, as it is making a critical impact on the lives of those involved in the South Australian construction industry.
REFERENCES


APPENDIX A – PROJECT TIMELINE

A summary of the project timeline and key activities is provided here:

<table>
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<th>2016</th>
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<th>2017</th>
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Note: the initial project timeline was nine months, however the project took approximately 16 months from the preliminary project meeting at the end of April 2016, to the completion of the final report at the start of July 2017. The primary delay in project completion was data collection, which in itself took seven months: very slow responses to the survey resulted in Phase 1 lasting four months, and similar difficulties in scheduling interviews resulted in Phase 2 lasting three months.
THE MERITS OF SUICIDE PREVENTION TRAINING FOR SA CONSTRUCTION WORKERS
SURVEY INFORMATION SHEET

Dear Participant,

Researchers from the University of South Australia, in collaboration with MATES in Construction SA (MIC SA), are inviting you to participate in a research project exploring the question: What are the additional merits of attending MATES in Construction training?

Participation in this research is voluntary. However, before you decide it is important that you are clear on what you will be required to do and the merits of being involved.

What is the purpose of this research?
MIC has trained around 90,000 construction workers nationwide in General Awareness Training (GAT) to recognise when a mate at work might be struggling to cope, as well as more than 7,000 volunteer Connectors and ASIST workers to help connect workmates to help when needed. While valuable information is collected from evaluations immediately after each training session, the purpose of this research is to better understand the additional outcomes of the training. In particular, the researchers are interested in how the training has impacted South Australian construction workers in the workplace and in the community.

What will I be required to do?
You will be required to complete an anonymous, 10 minute survey, either online or by hardcopy. The survey contains 20 items, including a mix of rating scale and open-ended questions about your experiences of using the skills discussed at MIC SA training in your day-to-day life. At the end of the survey, you will also be asked if you would like to participate in a second stage of the research—a brief telephone interview.

Who is being invited to participate in the study?
Any South Australian construction industry worker over the age of 18 years who has completed GAT or Connector training with MIC SA, since June 2014. The aim of the research is to provide a platform for those who have completed the GAT and/or Connector training and allow us to gather information specifically from these two groups.

How will my confidentiality be maintained?
The survey will be anonymous and data will only be seen by the research team. All anonymous digital data will be downloaded from the password-protected survey platform (SurveyMonkey) or entered electronically from the hardcopy surveys and will be kept on a password-protected UniSA server. At the completion of the project, the anonymous data will be stored on an encrypted USB for a period of five years (University of South Australia guidelines: Ownership and Retention Policy) in a locked cabinet in a locked room (University of South Australia, City East Campus, School of Nursing and Midwifery) and will only be accessed by the research team. After the five year period all digital files will be erased from the USB and the USB destroyed and desensitized in a confidential bin.

Direct quotes from what you have written may be used during the reporting and dissemination stage of the research (e.g. in journal articles and/or a short report to MIC SA). As you are not required to include your name with your results, you will not be identifiable in the reporting or dissemination stage (i.e. there is no risk to personal identification).

(PTO)
What if I want to withdraw from the study?
You are free to withdraw from participating in the research at any time prior to completing the survey. After this time, we will begin to analyse the data. As the survey is anonymous, you will not be able to withdraw from the study once you have completed the survey, as it will not be possible for the researchers to identify an individual participant’s responses in order to remove them.

Are there any risks?
There are no expected risks associated with participation in this project beyond those encountered during everyday life. However, some participants may find the topic of suicide distressing. If you experience any distress at any time, please contact one of the following:
- MIC 24/7 National Helpline – 1300 642 111
- Your local Connector or ASIST worker on your site
- Your Employee Assistance Program
- MensLine Australia – 1300 78 99 78 or https://www.mensline.org.au/

What are the benefits of being involved?
This research will provide important information about the merits of MATES in Construction training within the construction industry. Participating will give you an opportunity to express your thoughts about the training program which may help direct the future of the program.

Will I find out the results?
If you would like a summary of the anonymous research findings please contact Dr Monika Ferguson at the conclusion of the study; E: Monika.Ferguson@unisa.edu.au.

What next?
If you would like to find out more please contact Dr Monika Ferguson: P: 8302 1594; E: Monika.Ferguson@unisa.edu.au.
If you would like to participate you can either complete the survey online (https://www.surveymonkey.com/r/MATESinConstructionSA) or sign the hardcopy consent form and complete the survey attached and put survey in box or Reply Paid envelope (and post).

This project has been approved by the University of South Australia’s Human Research Ethics Committee. If you have any ethical concerns about the project or questions about your rights as a participant please contact the Executive Officer of University of South Australia Human Research Ethics Committee, +61 8 8302 3118 or via email Vicki.Allen@unisa.edu.au.

Kind regards,
The Research Team.

<table>
<thead>
<tr>
<th>Name</th>
<th>Telephone number</th>
<th>Email address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Monika Ferguson ¹</td>
<td>8302 1594</td>
<td><a href="mailto:Monika.Ferguson@unisa.edu.au">Monika.Ferguson@unisa.edu.au</a></td>
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<tr>
<td>Ms Michelle Caston ²</td>
<td>8373 0122</td>
<td><a href="mailto:mcaston@matesinconstruction.org.au">mcaston@matesinconstruction.org.au</a></td>
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<tr>
<td>Professor Nicholas Procter ²</td>
<td>8302 2148</td>
<td><a href="mailto:Nicholas.Procter@unisa.edu.au">Nicholas.Procter@unisa.edu.au</a></td>
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<tr>
<td>Ms Heather Eaton ³</td>
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¹Mental Health and Substance Use Research Group, School of Nursing and Midwifery, Division of Health Sciences, University of South Australia; ²MATES in Construction.
THE MERITS OF SUICIDE PREVENTION TRAINING FOR SA CONSTRUCTION WORKERS
INTERVIEW INFORMATION SHEET

Dear Participant,

Researchers from the University of South Australian, in collaboration with ‘MATES in Construction SA’ (MIC SA), are inviting you to participate in a research project exploring the question
What are the additional merits of attending ‘MATES in Construction’ training?

Participation in this research is voluntary. However, before you decide it is important that you are clear on what you will be required to do and the merits of being involved.

What is the purpose of this research?
MIC has trained around 30,000 construction workers nationwide in General Awareness Training (GAT) to recognise when a mate at work might be struggling to cope, as well as more than 7,000 volunteer Connectors and ASIST workers to help connect workmates to help when needed. While valuable information is collected from evaluations immediately after each training session, the purpose of this research is to better understand the additional outcomes of the training. In particular, the researchers are interested in how the training has impacted South Australian construction workers in the workplace and in the community.

What will I be required to do?
You will be required to participate in a 30 minute – 1 hour interview. The interview will be recorded and later transcribed.

Who is being invited to participate in the study?
Any participants who completed our survey exploring the merits of MIC training are invited to participate in the second stage of the research.

How will my confidentiality be maintained?
Prior to the interview/focus group you will be asked to select a pseudonym to be used throughout the discussion. This will help to preserve your anonymity in the recording and reporting of results. At the completion of the project, the transcript and recording of the interview will be stored on an encrypted USB for a period of five years (University of South Australia guidelines: Ownership and Retention Policy) in a locked compactus in a locked room (University of South Australia, City East Campus, School of Nursing and Midwifery) and will only be accessed by the research team. After the five year period all digital files will be erased from the USB and the USB destroyed and deposited in a confidential bin. Direct quotes from what you have said may be used during the reporting and dissemination stage of the research (e.g. in journal articles and/or a short report to MIC SA). As you will be using a pseudonym, your words will be non-identifiable (i.e. there is no risk to personal identification).

What if I want to withdraw from the study?
You are free to withdraw from participating in the research at any time prior to participating in the interview/focus group. After this time, we will begin to analyse the data.
Are there any risks?
There are no expected risks associated with participation in this project beyond those encountered during everyday life. However, some participants may find the topic of suicide distressing. If you experience any distress at any time, please contact one of the following:
- MIC 24/7 National Helpline – 1300 642 111
- Your local Connector or ASIST worker on your site
- Your Employee Assistance Program
- Lifeline Australia – 13 11 14 or [https://www.lifeline.org.au/](https://www.lifeline.org.au/)
- MensLine Australia – 1300 78 99 78 or [https://www.mensline.org.au/](https://www.mensline.org.au/)

If during the interview you are displaying behaviour that shows that your mental health may be at risk, the facilitator (Dr Monika Ferguson) will offer you assistance to phone the MIC helpline (1300 642 111).

What are the merits of being involved?
This research will provide important information about the merits of ‘MATES in Construction’ training within the construction industry. Participating will give you an opportunity to express your thoughts about the training program.

When will I find out the results?
If you would like a summary of the anonymous research findings please contact Dr Monika Ferguson at the conclusion of the study; E: [Monika.Ferguson@unisa.edu.au](mailto:Monika.Ferguson@unisa.edu.au).

What next?
If you have any more questions please contact Dr Monika Ferguson: P: 8302 1594; E: [Monika.Ferguson@unisa.edu.au](mailto:Monika.Ferguson@unisa.edu.au). Otherwise, Monika will call you at the agreed time to conduct the interview.

This project has been approved by the University of South Australia’s Human Research Ethics Committee. If you have any ethical concerns about the project or questions about your rights as a participant please contact the Executive Officer of University of South Australia Human Research Ethics Committee, +61 8 8302 5138 or via email [Vicki.Allen@unisa.edu.au](mailto:Vicki.Allen@unisa.edu.au).

Kind regards,
The Research Team.

Dr Monika Ferguson  
(Research Associate – UniSA)  
Michelle Caston  
(CEO – MIC SA)

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*Mental Health and Substance Use Research Group, School of Nursing and Midwifery, Division of Health Sciences, University of South Australia; †MATES in Construction.*
APPENDIX C – SURVEY RECRUITMENT POSTER

PARTICIPANTS REQUIRED

THE MERITS OF SUICIDE PREVENTION TRAINING FOR SA CONSTRUCTION WORKERS

The University of South Australia in collaboration with MATES in Construction SA (MIC SA) would like to know about your experience of undertaking GAT or Connector training.

Who is being invited to participate in the study?

Any South Australian construction industry worker over the age of 18 years who has completed a GAT or Connector training session only for MIC SA. The research will provide a platform for those who have completed the GAT and/or Connector training and allow us to gather information specifically from these two groups.

[Photo used courtesy of York Civil – GAT training session conducted by MIC SA]

What’s involved?

You will be required to complete an anonymous, 10 minute online survey. At the end of the survey, you will also be asked if you would be willing to participate in a second stage of the research – a brief telephone interview. For more information and to participate, please contact Dr Monika Ferguson:

E: Monika.Ferguson@unisa.edu.au, P: 8302 1594

This study has been approved by The University of South Australia’s Human Research Ethics Committee.
MIC PROJECT - SURVEY

PRELIMINARY QUESTIONS
1. Which of the following MIC SA Training have you completed (you can select more than one)?
   - O GAT
   - O Connector
   - O ASIST (Thank you for your interest. This survey is open to South Australian construction industry worker over the age of 18 years who have completed GAT or Connector training only with MIC SA, since June 2014)

BENEFITS OF MIC TRAINING
Confidence since undertaking MIC Training:
As you know, the purpose of MIC Training is to raise awareness of the signs when a mate is doing it tough and how to access help and support. MIC Training can have a number of benefits for people who attend, both at work and in their personal lives. We’re interested to find out more about your experiences.

Please read the statements below and indicate how confident you feel about each of them:

<table>
<thead>
<tr>
<th>Since undertaking MIC Training, how confident do you feel about the following?</th>
<th>Extremely confident</th>
<th>Confident</th>
<th>Neutral</th>
<th>Not confident</th>
<th>Not at all confident</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Talking to mates at work when they’re having a tough time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Talking to mates at work when they’re having a tough time</td>
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<td></td>
<td></td>
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<tr>
<td>4. Talking to your family when you’re having a tough time</td>
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<tr>
<td>5. Talking to your family when they’re having a tough time</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Use of MIC services and skills:
We are also interested to hear about your use of MIC services and skills since undertaking the training.

6. Have you used MIC services since undertaking the training?
   ○ No
   ○ Yes – Please describe what you used

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

7. Do you know if a mate at work used MIC services since undertaking the training?
   ○ Unknown
   ○ Yes – Please describe what your mate used

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Have you used what you learnt during MIC Training to assist in any of the following areas of your work and/or personal life?

8. Suicidal thoughts:
   ○ No
   ○ Yes – Please describe what you used

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

9. Family/relationships:
   ○ No
   ○ Yes – Please describe what you used

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
10. Drug/alcohol related issues:  
   O No  
   O Yes – Please describe what you used

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

11. Work related stress:  
   O No  
   O Yes – Please describe what you used

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

12. Financial pressure:  
   O No  
   O Yes – Please describe what you used

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

13. Communicating with mates:  
   O No  
   O Yes – Please describe what you used

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________
14. Communicating with family/loved ones:
   O No
   O Yes – Please describe what you used

Experiences with suicide
15. Have you experienced any of the following (you can select more than one)?
   O A family member has suicided
   O A family member has attempted suicide
   O A mate has suicided
   O A mate has attempted suicide
   O You have attempted suicide
   O None of the above

DEMOGRAPHIC QUESTIONS
The following section contains some basic demographic information about you.
16. Gender: O Male O Female
17. Age (in years): _______________________________
18. Occupation/Trade: ____________________________
19. Years in the industry: _________________________
20. Postcode: _____________________________
INTERVIEW

We are interested in speaking to some individuals to understand the benefits of MIC Training in more detail through a brief telephone interview. If you would like to be involved, please provide your contact details here:

Email: ________________________________
Phone number: __________________________

- Morning (8am – 11am)
- Midday (11am – 2pm)
- Afternoon (2pm – 6pm)

Please be aware that not everyone who has provided details will be contacted – we will randomly select a small number of people. If you are not contacted, we thank you in advance for being willing to be involved.

NB: Please remove this page from the answers of the previous survey.

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS BRIEF SURVEY

As a reminder, the following services are available if you are experiencing any distress after completing this survey:

- MIC 24/7 National Helpline – 1300 642 111
- Your local Connector or ASIST worker on your site
- Your Employee Assistance Program
- MensLine Australia – 1300 78 99 78 or https://www.mensline.org.au/

Please place this survey in the secure box provided or the Reply Paid envelope (and post).
APPENDIX E – INTERVIEW SCHEDULE

NOTE: This schedule is a guide only and lists some of the questions asked of participants; most interviews followed a much more conversational format, with additional questions being asked as needed or as the conversations developed.

1. To give our discussion a bit of context, could you tell me a bit about your occupation and what you do at work/what an average day at work looks like for you?
2. So, could you start by telling me a little bit about which MIC training you have been to?
3. Ok, so building on that, can you tell me some of the key messages you learnt during the training?
4. So, overall, have you noticed any changes in terms of how you work with others since doing MIC training, if at all?
5. What about other people that you work with – do you think the training has changed how people at work act and do things?
6. Thinking about sites more broadly, not just person-to-person, can you tell me what you think about how sites might be different since MIC training?
7. And then thinking about your mates outside of work, can you describe any ways that you might do or say things differently now, since doing the training?
8. And then in terms of your family or significant others, can you think of any ways that you talk or do things differently with your family since doing the training?
9. Can you think of anything else that has changed, for you personally, your mates, or your workplace, since MIC training has happened?